Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000

Express Mail No.: EV452772686US

or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where

indicated unless corrected I maintenance fee notification	below or directed otherwise	in Block 1, by (a) sp	s and notification secifying a new co	orrespondence address	; and/or (b) indicating a sepa	arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)				Note: A certificate of mailing can only be used for domestic mailings of the		
				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
20583 75	590 02/25/2004			have its own certificat	e of mailing or transmission.	m or rormar arawing, must
"JONES DAY				Certificate of Mailing or Transmission		
222 EAST 41ST S	TREET	/ 01. 6	7	I hereby certify that the	nis Fee(s) Transmittal is bein	g deposited with the United
NEW YORK, NY 10017				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile		
		T MAN 2 P AND	. G	transmitted to the USF	TO, on the date indicated bel	
		MAY 2 5 200	<b>4</b> H			(Depositor's name)
		TE S	. <b>4</b>			(Signature)
	1	(P) = 4	Ø		•	(Date)
APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		TOP	ATTORNEY DOCKET NO.   CONFIRMATION NO.	
<u> </u>				TOR	J	
. 10/007,457	11/08/2001	Aiden Flana			10177-058	3341
LASER	METHOD FOR MAKING	AND MEASURING	A COATING ON	THE SURFACE OF	A MEDICAL DEVICE US	SING AN ULTRAVIOLET
APPLN. TYPE	N. TYPE SMALL ENTITY ISSUE FEE		PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300		\$1630	05/25/2004
EXAMINER		ART UNIT	CL	ASS-SUBCLASS	Ĩ	
MICHENER, JENNIFER KOLB		1762		427-002100	•	
1 Change of correspondence	e address or indication of "Fe	ee Address" (37	? For printing on	the natest front mass	list (1) the	
CFR 1.363).	e address of maleation of Tr	,		the patent front page, 3 registered patent a		s Day
☐ Change of corresponde Address form PTO/SB/12	ence address (or Change of C 22) attached.	orrespondence	firm (having as a	atively, (2) the name member a registered	attorney or 2	
Tree Address" indicati PTO/SB/47; Rev 03-02 ( Number is required.	on (or "Fee Address" Indica or more recent) attached. Us	ion form		mes of up to 2 regist s. If no name is lister		
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON THE	PATENT (print o	or type)		
			•	. ,	ssignee data is only appropris	ate when an assignment has
been previously submitte (A) NAME OF ASSIGN	d to the USPTO or is being	submitted under separa	ite cover. Complet	ion of this form is NO Y and STATE OR CO	Γ a substitute for filing an ass	ignment.
Scimed Life	e Systems, Inc.		Maple Gro	ve, MN	,	
Please check the appropriate	e assignee category or catego	ries (will not be printe	ed on the natent):	☐ individual 🖾 o	corporation or other private gr	roun entity   D government
4a. The following fee(s) are			ayment of Fee(s):	·	torporation of other private gr	oup charty 2 government
■ Issue Fee	cherosca.			ount of the fee(s) is end	rlosed	
☐ Payment by credit card. Form PTO-2038 is attached.						
☐ Advance Order - # of	Copies					credit any overnayment to
		De	posit Account Nur	nber_50-3013	harge the required fee(s), or (enclose an extra c	opy of this form).
Director for Patents is reque	sted to apply the Issue Fee a	nd Publication Fee (if	any) or to re-apply	any previously paid i	ssue fee to the application ide	ntified above.
(Authorized Signature)	1. d. Hlter hi Lode	(Date) May	25, 2004			
Gidon D. Steri	de flu hy Lode n (Reg. No. 27,	4697 Reg. N.	0. 44.512			
	d Publication Fee (if requir			05/28/2004 9	SSESHE2 00000051 5030	)13 10007457
other than the applicant; interest as shown by the re	a registered attorney or ag cords of the United States Pa	ent; or the assignee of tent and Trademark C	or other party in	01 FC:1501	1330.00 DA	
This collection of information is required by 37 CFR 1.311. The information is required obtain or retain a benefit by the public which is to file (and by the USPTO to process) application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individu case. Any comments on the amount of time you require to complete this form and/suggestions for reducing this burden, should be sent to the Chief Information Officer, U.Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virgin 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRES. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.				02 FC:1504 300.00 DA		
Under the Paperwork Reduction Act of 1995, no persons are required to respond to collection of information unless it displays a valid OMB control number.						